



**APPLICATION FOR NUISANCE
WILD ANIMAL CONTROL PERMIT**

State Form 5600 (R4/8-05)
DEPARTMENT OF NATURAL RESOURCES

DEPARTMENT OF NATURAL RESOURCES

Attn: Commercial License Clerk
Division of Fish and Wildlife
402 W. Washington St., Rm. W273
Indianapolis, IN 46204-2781
Telephone: (317) 233-6527
Fax Number: (317) 232-8150

Instructions: 1. Please type or print information.
2. Please mail the completed and signed application form
to the above address.

Check One: ☐ New Applicant ☐ Renewal Date _____

Name of Applicant _____ Telephone Number _____

Name of Business (if applicable) _____

Address (Number and Street or Rural Route) _____

City _____ State _____ ZIP Code _____ County _____

E-Mail Address _____ Website (if applicable) _____

(1) Will the nuisance wild animals be removed from your own property? ☐ Yes ☐ No If yes, list the complete property address (street, city, county) where the animals will be removed (if different from above): _____
_____. If yes, please skip to question #5.

(2) Are you applying for this permit to remove nuisance wild animals for your employer/friend/neighbor without charging a fee? ☐ Yes ☐ No If yes, list the property address (street, city, county) and/or business name where the animals will be removed: _____

(3) Will you be charging a fee or advertising to provide nuisance wild animal control services? ☐ Yes ☐ No
If you are a new applicant and answered yes to question #3, you must first successfully complete the permit examination.

(4) Please list the counties where you plan on removing nuisance wild animals (county names): _____

(5) Names of assistants (if applicable): _____

(6) Please list the species of wild animals that will be removed: _____

(7) Please list the proposed method(s) of capturing wild animals (live-trap, hand catch, snare, etc.): _____

(8) Please list all methods of disposition that will be used (release, euthanize by carbon dioxide, gunshot, etc.): _____

*I have read and understand the regulations and agree to abide by them.
Under the penalties of perjury (IC 35-44-2-1), I affirm the information supplied by me is true and correct.*

Signature of Applicant _____ Date _____

FOR OFFICE USE ONLY

Test/Cont Ed.: ☐ Yes ☐ No ☐ N/A Issue Date: _____ Exp. Date: _____

Approved by: _____ Date: _____

Comments: _____